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This is the published version of a paper published in *Issues in Mental Health Nursing*.

Citation for the original published paper (version of record):

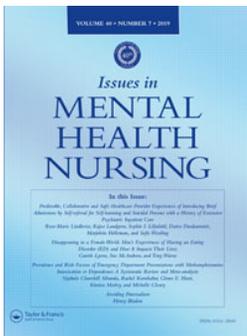
Baxter, R., Björk, S., Edvardsson, D. (2019)
Commentary on: Sullivan and Willis (2018). Towards Changing the Long-Term Care
(LTC) Paradigm: Explicating the Concept of Thriving in Older Adults Living in LTC
Issues in Mental Health Nursing, 40(7): 639-640
<https://doi.org/10.1080/01612840.2019.1590486>

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Permanent link to this version:

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To cite this article: Rebecca Baxter, Sabine Björk & David Edvardsson (2019) Commentary on: Sullivan and Willis (2018). Towards Changing the Long-Term Care (LTC) Paradigm: Explicating the Concept of Thriving in Older Adults Living in LTC, *Issues in Mental Health Nursing*, 40:7, 639-640, DOI: [10.1080/01612840.2019.1590486](https://doi.org/10.1080/01612840.2019.1590486)

To link to this article: <https://doi.org/10.1080/01612840.2019.1590486>



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Published online: 28 May 2019.



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Commentary on: Sullivan and Willis (2018). Towards Changing the Long-Term Care (LTC) Paradigm: Explicating the Concept of Thriving in Older Adults Living in LTC

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Thriving in long-term care has emerged as a contemporary concept given the increasing demand for aged care services that support personhood and place-related well-being, and the challenges of measuring the characteristics and outcomes of such services. Numerous studies have explored aspects of thriving for residents in long-term care, yet no consensus has been reached regarding an explicit definition. Sullivan and Willis (2018) have attempted to fill this gap in the literature using the Hybrid Model of Concept Development to cultivate a context-specific definition of thriving for older persons in the long-term care setting. The revised definition appears to encompass some important aspects of thriving; however, there are several concerns regarding the development of this definition, and its alignment with the theoretical foundation of thriving as a positive life-world construct. Additionally, a substantial amount of empirical thriving literature appears to have been overlooked in working up this definition.

In the long-term care setting, thriving has been described as a useful concept that acknowledges residents' experiences of well-being and life satisfaction within the context of their environment and life stage (Bergland & Kirkevold, 2001; Bergland et al., 2014); yet this revised definition of thriving includes components such as 'freedom from pain and physical stressors' and 'appetite and weight maintenance' (Sullivan & Willis, 2018). While Sullivan and Willis (2018) sought to explicate and define the *concept* of thriving in long-term care, in light of the extensive work of Bergland and Kirkevold, the above components instead seem to refer to the *characteristics* of resident thriving, or possibly even covariates or predictors of thriving. For example, is pain a negative predictor to thriving? Is weight loss or weight gain an outcome of thriving or lack of thriving? These are empirical questions that can be studied, rather than being incorporated into the concept itself. Including aspects such as these in a definition risks leading authors astray, since decisions of where to draw the line of what not to include becomes arbitrary. However, the types of studies needed to clarify if factors such as pain, physical stressors, appetite et

cetera indeed are covariates, predictors or characteristics of thriving are yet to emerge in the literature. Inclusion of such aspects in the definition of thriving also seems to link the concept to 'failure to thrive', and by that risks short-changing the positive health-promoting side of the thriving coin, or may refer to a different currency altogether. Perhaps this is due, in part, to what seems to be an amalgamation of resident and staff descriptions of the phenomena. If the aim of explicating and defining the concept of thriving in long-term care is to create conceptual clarity, and possibly to change the paradigm from deficit-based to strengths-based, perhaps it is important to first draw upon empirical studies illuminating whether residents' subjective experiences of thriving and staffs' objective assessments of resident thriving are in fact describing the same side of the conceptual coin?

In contrast to negatively geared outcome measures, thriving as an indicator of place-related well-being has been said to emphasize positive aspects of ageing and residing in long-term care as it is not necessarily dependant on health or function (Bergland & Kirkevold, 2014). Interestingly, several empirical studies directly related to the concept and measurement of thriving in long-term care were not included in the development of this revised definition, instead, the authors suggested that 'given the state of the science, there are no reliable and valid measures of thriving for this population, thus, proxy measures have been used' (Sullivan & Willis, 2018, p. 390). Surprised by this conclusion, we feel obliged to draw attention to the Thriving of Older People Assessment Scale (TOPAS) which has been developed from a solid base of empirical studies and published as a hitherto valid and reliable measure to assess self- and proxy-based ratings of nursing home resident thriving (Bergland et al., 2014; Bergland, Kirkevold, Sandman, Hofoss & Edvardsson, 2015). The TOPAS has also been used in a number of published studies to explore factors and characteristics related to resident thriving (Björk et al., 2017; Björk et al., 2018; Björk, Lövheim, Lindkvist, Wimo & Edvardsson, 2018; Patomella, Sandman, Bergland & Edvardsson, 2016). Given that a large proportion of nursing home residents are known to report

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some form of cognitive impairment, a measure that can be used in both self and proxy ratings of thriving, such as the TOPAS, ought not to be overlooked in further work – conceptual, definitional or otherwise.

We welcome the focus of Sullivan and Willis (2018) to move the knowledge on thriving forward, as developing a deeper understanding of the concept is necessary to guide health-promoting care interventions and future research to inform and enhance resident thriving. Continued research into the meanings, measures, predictors and covariates of thriving from both experiential and observational perspectives will be useful to inform the definition, exploration and promotion of thriving in the long-term care context. It is an imperative, however, that such exploratory work also reflectively and carefully builds on the existing empirical work of others. This is to ensure that gaps in current knowledge are not artificially created, but that future research thoroughly and credibly identifies, includes, critiques and extends existing literature and thereby pushes the boundaries of knowledge forward in a valid, reliable and convincing way.

References

- Bergland, A., & Kirkevold, M. (2001). Thriving – A useful theoretical perspective to capture the experience of well-being among frail elderly in nursing homes? *Journal of Advanced Nursing*, 36(3), 426–432. doi:10.1046/j.1365-2468.2001.01990.x
- Bergland, A., Kirkevold, M., Sandman, P.-O., Hofoss, D., Vassbo, T., & Edvardsson, D. (2014). Thriving in long-term care facilities: Instrument development, correspondence between proxy and residents' self-ratings and internal consistency in the Norwegian version. *Journal of Advanced Nursing*, 70(7), 1672–1681. doi:10.1111/jan.12332
- Bergland, A., Kirkevold, M., Sandman, P. O., Hofoss, D., & Edvardsson, D. (2015). The Thriving of Older People Assessment Scale: Validity and reliability assessments. *Journal of Advanced Nursing*, 71(4), 942–951. doi:10.1111/jan.12593
- Björk, S., Lindkvist, M., Wimo, A., Juthberg, C., Bergland, A., & Edvardsson, D. (2017). Residents' engagement in everyday activities and its association with thriving in nursing homes. *Journal of Advanced Nursing*, 73(8), 1884–1895. doi:10.1111/jan.13275
- Björk, S., Lindkvist, M., Lövheim, H., Bergland, A., Wimo, A., & Edvardsson, D. (2018). Exploring resident thriving in relation to the nursing home environment: A cross-sectional study. *Journal of Advanced Nursing*, 74(12), 2820–2830. doi:10.1111/jan.13812
- Björk, S., Lövheim, H., Lindkvist, M., Wimo, A., & Edvardsson, D. (2018). Thriving in relation to cognitive impairment and neuropsychiatric symptoms in Swedish nursing home residents. *International Journal of Geriatric Psychiatry*, 33, 49–57. doi:10.1002/gps.4714
- Patomella, A.-H., Sandman, P.-O., Bergland, A., & Edvardsson, D. (2016). Characteristics of residents who thrive in nursing home environments: A cross-sectional study. *Journal of Advanced Nursing*, 72(9), 2153–2161. doi:10.1111/jan.12991
- Sullivan, L., & Willis, D. G. (2018). Towards changing the long term care (LTC) paradigm: Explicating the concept of thriving in older adults living in LTC. *Issues in Mental Health Nursing*, 39(5), 388–397. doi:10.1080/01612840.2017.1390021